

Ser 10/760,447

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Richard D. Dettinger et al.	Examiner:	unknown
Serial No.:	10/760,447	Group Art Unit:	unknown
Filed:	January 20, 2004	Docket:	ROC920030372US1
Title:	Lowering the Quality Level of a Selected Program		

PRELIMINARY AMENDMENT UNDER 37 CFR § 1.115

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please amend the above-identified patent application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims begin on page 3 of this paper.

Remarks/Arguments begin on page 9 of this paper.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Amendment/Response Transmittal

In re application of: Richard D. Dettinger et al. Group Art Unit: unknown
 Serial No.: 10/760,447 Confirmation No.: unknown
 Filed: January 20, 2004 Examiner: unknown

For: LOWERING THE QUALITY LEVEL OF A SELECTED PROGRAM

Mail Stop Non-Fee Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is a Preliminary Amendment in the above-identified Application.

☒

No additional fee is required.

☐

The filing fee has been calculated as follows:

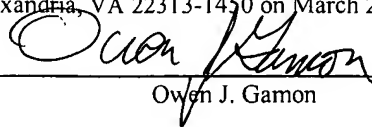
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra
Total	25	- 25	= 0
Independent	5	- 5	= 0
<input type="checkbox"/> First Presentation of Multiple Dependent Claim			

Other Than Small Entity

Rate	Additional Fee
x \$18.00=	\$00.00
x \$86.00=	\$00.00
\$290.00	\$00.00
TOTAL	\$00.00

**CERTIFICATE OF TRANSMISSION UNDER
 37 C.F.R. 1.8**

I hereby certify that the enclosed or attached correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 29, 2004.


 Owen J. Gamon

Request for Extension of Time:

☐ Applicants respectfully request a ___ month extension of time to respond to the Office Action dated ___/___/___ . Please charge Deposit Account 09-0465 in the amount of \$_____. A duplicate copy of this sheet is enclosed.

Deposit Account Authorization:

☐ Please charge Deposit Account No. 09-0465 in the amount of \$_____, the Additional Fee calculated above. A duplicate copy of this sheet is enclosed.

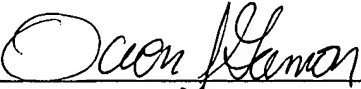
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0465. A duplicate copy of this sheet is enclosed.

☒ Any additional filing fees required under 37 C.F.R. §1.16.

☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

Date: March 29, 2004

By 
Owen J. Gamon
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